

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	CD NO.	DATE
FEE DETERMINATION			
O.P.E. CLASSIFIER			
FORMALTY REVIEW			
RESPONSE FORMALTY REVIEW			

INDEX OF CLAIMS

✓ _____ Rejected N _____ Non-elected
 - _____ Allowed I _____ Interference
 - (Through numerals) Canceled A _____ Appeal
 + _____ Restricted O _____ Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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